VISUAL INFORMATION (VI) WORK ORDER
For use of this form, see AR-25-1; the proponent agency is ODISC4.
For fill instructions look at the status bar (lower left corner) or hit the F1 key. Only fill out front page

1. WORK ORDER NUMBER

2. SECURITY CLASSIFICATION LINC! ASSIFIED

			UNCLA	SSIFIED		
SECTION I - REQUIREMENT						
3.	TO (VI Activity)	4. FROM (Unit or Activity)				
	Commander					
	Visual Information					
	ATTN: MCHD-SPV					
	Fort Detrick, MD 21702					
3b.	E-MAIL ADDRESS		4b. E-MAIL ADDRESS	3		
5	5. ACCOUNT CODE		6. ACCOUNT NO.			
J.	3. AGOODITI CODE		C. ACCOUNT NO.			
7a.	REQUESTER (Name, Grade)	b. PHON	NE AND FAX NUMBERS	8. DATED R	EQUESTED (YYYYMMDD)	
9a.	ALTERNATE POINT OF CONTACT	b. PHON	NE AND FAX NUMBERS	10 DATE RE	QUIRED (YYYYMMDD	
Ja.	ALTERNATE FOINT OF CONTACT	b. FIIOI	NE AND I AX NOWBERS	10. DATE KE	QOINED (TTTTMINIDD	
11. (QUANTITY	12. DESC	12. DESCRIPTION OF WORK (Attach diagrams, etc., and list enclosure(s))			
(a)						
(b)	35mm Slides	1				
(c)	Camera Ready Artwork	-				
(d)	Electronic Images	-				
(e)	TV	-				
(f)	Audio	-				
	Video Tape Copies	-				
(g) (h)	Photo Print Copies	-				
(i)	Computer Photo Prints	-				
	Computer Photo Transparencies	-				
(j) (k)	Presentation Services	-				
(I)	Motion Picture	-				
	Other (Specify)	-				
(m) 13.	JUSTIFICATION FOR REQUESTED SERVICE					
13. JUSTIFICATION FOR REQUESTED SERVICE						
14a.			14b.	VALIDATION SIGN	MATURE	
Requested service is for official purposes and is required by stated deadline.				VALIDATION SIGI	NATURE	
SECTION II - JOB ASSIGNMENT (FOR AUDIOVISUAL OFFICE USE ONLY)						
15. DATE RECEIVED (YYYYMMDD) 16. DATE ASSIGNED (YY			(YYMMDD) 17. AUDIOVISUAL FACILITY APPROVAL (Signature)			
18. SPECIAL INSTRUCTIONS						
SECTION III - WORK DECEIDT						
19a. CUSTOMER NOTIFIED SECTION III - WORK RECEIP 19b. RECEIVED BY (Signatur					19c. DATE (YYYYMMDD)	
			, 3,		, ,	